

DATE 6/14/22

1. NAME CORSE, James

SERIAL No. 3182278

RANK Cpl.

ORGANIZATION Hqs. Co. 2nd Pioneer Inf. & DIVISION No War.

GRAVE LOCATION American E.F.Cty., Is-sur-Tille, Cote-D'Or.

NUMBER 58

41

GRAVE

41

ROW

ISs-TILLE (Côte d'Or)

PLOT

2. ORIGINAL BATTLE AREA GRAVE LOCATION

GRAVE

COMMUNE

DEPT.

COORDINATES E.302.26 N.84.23

Not of record

3. CONCENTRATED TO

DATE

GRAVE

ROW

PLOT

CEMETERY

CTY. NUMBER

Data concerning any identification found on remains when concentrated, such as collar insignias, letters, broken bones, missing parts, etc.

DATE OF DEATH

Sept 21, 1918

STATE FROM WHICH HE CAME

New Jersey

MEDALS OR DECORATIONS AWARDED

None

SUBSEQUENT REBURIALS

Not of record

DATE

GRAVE

ROW

PLOT

CEMETERY

DATE

GRAVE

ROW

PLOT

CEMETERY

SIGNATURE, AREA SUPERVISOR

W.H. Leathman

W.H. QUARTERMAN, CAPT. F.A., Supervisor Area No. 4

3. FINAL GRAVE LOCATION

6/14/22

30

17

A

DATE

GRAVE

ROW

Block

Plot

AUDITED BY

m.l.l.

5722

128



St. Mihiel American Cty # 1233 Thiaucourt Meurthe et Moselle CEMETERY

Robert C. Davis, Major General,

The Adjutant General

MAY 27 1925

World War Div

MAY 25 1925

1922

RECEIVED  
MAY 10 1945  
HEADQUARTERS  
AMERICAN GRAVES REGISTRATION SERVICE  
WASHINGTON, D. C.

## INSTRUCTIONS FOR PREPARATION OF FORM 114 B

1. Forms 114-B are to be prepared by Registration Branch in quadruplicate, three copies to be forwarded to Area Supervisor who will accomplish paragraph 2 and return all three copies to Headquarters, American Graves Registration Service.
2. Paragraphs 1 and 3 will be accomplished by Registration Branch, Headquarters, American Graves Registration Service, Q.M.C., in Europe.
3. Paragraph 2 will be accomplished by Area Supervisor from data on file in his office.
4. If data is entered on Form 114-B from Form 1, Form 16, Form 1-A or Form 16-A, statement to this effect will be made on Form 114-B STATING WHICH G.R.S. form data is taken from. If data concerning co-ordinates is approximate and NOT accurate, statement to this effect will be made on these forms.

# GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Corse ..... James .....  
(Surname.) (Number.) (First Name and Initials.)

Corp. ..... Hdq. 2nd. Pioneer Inf. ....  
(Rank.) (Organization.)

DATE OF BURIAL ..... Sept 23, 1918. ....

PLACE OF BURIAL Is-Sur-Tille .....

(Give Cemetery, Town and Department.) Map reference must specify clearly what map is used.

American Exp. Force Cemetery 58

Map D-24

Died 9/21/18  
camp Troop #41  
Leuse Loh Pneu.

GRAVE NUMBER ..... 41 .....

HOW MARKED: Name Peg? Yes Cross? Yes

Headboard? ..... Bottle? .....

IDENTIFICATION TAGS:

Was one buried with body? Yes

Was one fastened to name peg or stake used as a grave marker? Yes

If name unknown and tags missing, description and marks should be given here:

REPORTED BY:

Joseph A. Morris 2nd. Pioneer Inf. .....

(Signature and Rank of Reporting Officer.)

This portion to be forwarded to Adj. Gen'l., G. H. Q., A. E. F.

# GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

**Corse** **3182278** **James**  
(Surname.) (Number.) (First Name and Initials.)

**Corporal** **Hdq. Co. 2nd Pion Inf.**  
(Rank.) (Organization.)

DATE OF BURIAL **Sept. 25 1918.**

PLACE OF BURIAL **Is-sur-Tille**

(Give Cemetery, Town and Department.) Map reference must specify clearly what map is used.

**Amer N.F. Cemetary # 58**

**Map D-24**

GRAVE NUMBER **41**

HOW MARKED: Name Peg? **Yes** Cross? **Yes**

Headboard? ..... Bottle? .....

IDENTIFICATION TAGS:

Was one buried with body? **Yes**

Was one fastened to name peg or stake used as a grave marker? **Yes**

If name unknown and tags missing, description and marks should be given here:

REPORTED BY:

*Joseph A. Morris, Chaplain*  
(Signature and Rank of Reporting Officer.)

This portion to be forwarded to Adj. Gen'l., G. H. Q., A. E. F.

CODE SLIP

HEADING	SUB-HEADING	NO. OF COLS	CODE
NAME	CORSE, James	COR	3 5 8
BURIED	CEMETERY	1233	3
	GRAVE	30	30
	ROW	17	17
	BLOCK	a	1
STATE	New Jersey		35
RANK	Cpl		2
DIVISION	Inf		51
ORGANIZATION	2		002
ARM	Pion		1
MARITAL	no		2
NAME	Corse	Cor	3 5 8
Georganna Arthur	STATE		2
RESIDENCE	COUNTY		2
all rel. foreign	CITY		3
RELATION	Mother		1
OTHER			1
ELIGIBILITY	Foreign		4
NATIVITY			1
RACE			1
ENGLISH			1
ATTENDANT			1
HEALTH			1
NO. OF SONS			1
DATE OF	MO.		1
. TRIP	YR.		1
ACCEPTANCE	Country	Scotland	2

**AUDITED**

JAN 18 1928  
R.M.

*R.M.*

*McL*

29/514/

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

DATE February 10, 1930

NAME Corse James RANK Cpl SERIAL 3182278 ORGANIZATION Hq Co 2nd Pion Inf DATE OF DEATH Sept 21 1918

STATE New Jersey CTY. NO. 1233 GRAVE 30 ROW 17 BLOCK A

Check relationship

Living - Deceased

MOTHER

:  : :  
:  : :  
:  : :

STEPMOTHER (For the year prior to commencement of service)

: : Mrs Georgiana Arthur Corse

NAME

2. Bridge St.

AND

MOTHER THRU ADOPTION (For the year prior to commencement of service)

: : Wynnd Kirkwall

ADDRESS

Orkney Islands

MOTHER IN LOCO PARENTIS (For the year prior to commencement of service)

: : Bestland

WIDOW (Who has not remarried)

: : all not foreign

Single man

: : 12/20/32

Veterans Bureau Claim Number  
29/156

C - 57598

920 2/13/30

inst Camp

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C  
Corse, James

May 28 , 1929.

Mrs. Maud I. Croaves,  
128 -52nd St.,  
Woodcliff, N. J.

Dear Madam:

Your attention is invited to the enclosed copy of an Act of Congress approved March 2, 1929, entitled an Act "To enable the mothers and widows of the deceased soldiers, sailors and marines of the American forces now interred in the cemeteries of Europe to make a pilgrimage to these cemeteries".

The records of this office show that you are the <sup>sister of the</sup> late Corporal James Corse, Hq. Co., 1st Regt., 1st Div., whose remains are now interred in the St. Mihiel American Cemetery, Thiaucourt, Mourthe-et-Moselle, France.

Will you please advise this office whether or not he is survived by a mother or widow who is entitled under the provisions of the above quoted Act, to make the pilgrimage, and if so, will you please furnish the full names and addresses of the mother and widow in order that action may be taken to extend invitations to them to make the pilgrimage. Both mothers and widows are entitled to make the pilgrimage.

Your attention is particularly invited to Section 4 of the enclosed Act, which defines the terms "mother" and "widow". If the relative is a stepmother, mother through adoption, or any woman who stood in loco parentis to the decedent, a statement as to her relationship is requested. If he was survived by a widow who has since remarried it is also requested that a statement to that effect be made.

For your reply, you may use the enclosed envelope which requires no postage.

For The Quartermaster General,

Very truly yours,

JOHN T. HARRIS,  
Major, Q. M. Corps,  
Assistant.

2 incls.  
Act of Congress.  
Envelope.

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C

August 29, 1929.

Corse, James  
1233

Mrs. Maud I. Greaves,  
126 32nd Street,  
Woodcliff, N.J.

Dear Madam:

The records of this office do not indicate that a reply has been received to our communication dated May 28, 1929 making inquiry concerning the name and address of the mother and widow of the deceased service man above named. These addresses are desired with a view to ascertaining the number of mothers and widows who desire to make a pilgrimage to the cemeteries of Europe in which the remains of their sons and husbands are interred.

Will you please fill in the answers to the following questions in the space provided on this letter, and return the letter to this office in the enclosed envelope which requires no postage?

Write answers in space below

1. Is the deceased survived by a widow who has not since remarried? If so, give her complete address:

2. If he is survived by a mother, stepmother, mother thru adoption, or any other woman who stood in loco parentis to him, according to the terms of Section 4 of the enclosed Act, give her name, address, and relationship in the space opposite.

3. If survived by a widow or mother does she desire to make the pilgrimage?

For The Quartermaster General,

Very truly yours,

2 Incls.  
Act of Congress  
Envelope

JOHN T. HARRIS,  
Major, Q. M. Corps,  
Assistant.

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL  
WASHINGTON

IN REPLY REFER TO QM 293 A-C

Corse, James

May 28 , 1929.

Mrs. Maud I. Greaves,  
126 -52nd St.,  
Woodoliff, N. J.

Dear Madam:

Your attention is invited to the enclosed copy of an Act of Congress approved March 2, 1929, entitled an Act "To enable the mothers and widows of the deceased soldiers, sailors and marines of the American forces now interred in the cemeteries of Europe to make a pilgrimage to these cemeteries".

The records of this office show that you are the sister of the late Corporal James Corse, Hq. Co., 8th Pion. Inf., whose remains are now interred in the St. Mihiel American Cemetery, Thiaucourt, Meurthe-et-Moselle, France.

Will you please advise this office whether or not he is survived by a mother or widow who is entitled under the provisions of the above quoted Act, to make the pilgrimage, and if so, will you please furnish the full names and addresses of the mother and widow in order that action may be taken to extend invitations to them to make the pilgrimage. Both mothers and widows are entitled to make the pilgrimage.

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For your reply, you may use the enclosed envelope which requires no postage.

For The Quartermaster General,

Very truly yours,

JOHN T. HARRIS,  
Major, Q. M. Corps,  
Assistant.

2 incls.  
Act of Congress.  
Envelope.

HV ✓

✓  
QM 293 A-C  
CORSE, James - Cpl.

January 18, 1924

Mrs. Maud I. Greaves,  
126 32nd St.,  
Woodcliff, N.J.

Dear Madam:

The Quartermaster General desires to invite your attention to the inclosed card which gives the permanent cemetery location of the soldier's grave in which you are interested.

This American military cemetery is one of those to be maintained by the United States for all time in Europe. Each grave will be marked by a headstone of white marble, of dignified design, with the name, rank, division, organization, date of soldier's death and State from which he came. Headstones will be placed at all graves in connection with the improvement work now in progress, as soon as possible and without waiting for special action or request on the part of relatives.

Please be assured that in effecting removal of the dead, the utmost reverential care was exercised and more than willingly accorded by those who performed this sacred duty. For the future, these graves will be perpetually maintained by the Government in a manner befitting the last resting place of our heroes.

Very truly yours,

✓  
R.L. FOSTER

Assistant.

RD  
157

✓  
1-Incl.  
Record card.

O.Q.M.G.  
Central Mail & Files Bt.



JAN 18 1924  
H.B.

CORSE, James QM 293. A-C

January 18, 1924

Mrs. Georgia Arthur Corse,  
3 Bridge Wynd, Kirkwall,  
Orkney Islands, Scotland.

Dear Madam:

The Quartermaster General desires to invite your attention to the inclosed card which gives the permanent cemetery location of the soldier's grave in which you are interested,

This American military cemetery is one of those to be maintained by the United States for all time in Europe. Each grave will be marked by a headstone of white marble, of dignified design, with the name, rank, division, organization, date of soldier's death and State from which he came. Headstones will be placed at all graves in connection with the improvement work now in progress, as soon as possible and without waiting for special action or request on the part of relatives.

Please be assured that in effecting removal of the dead, the utmost reverential care was exercised and more than willingly accorded by those who performed this sacred duty. For the future, these graves will be perpetually maintained by the Government in a manner befitting the last resting place of our heroes.

Very truly yours,

R. L. FOSTER

Assistant.

RD

1-Incl.  
Record card.

O.Q.M.G.  
Central Mail & Files Bldg



JAN 18 1924  
H.B.

Corse, James Cpl.

Dec. 6, 1923

Mrs. Mary Swanson,  
City Hospital School of Nursing,  
Department of Public Welfare,  
Welfare Island, New York City,  
N. Y.

Dear Madam:


The Quartermaster General desires that receipt be acknowledged of your letter of December 3rd, 1923.

Please be informed that when the American Cemetery at Is-sur-Tille, Cote D' Or, was abandoned, the remains of your brother, the late Corporal James Corse, Headquarters Company, 2nd Pioneer Infantry, were re-buried in Grave 30, Row 17, Block A, St. Mihiel American Cemetery, Thiaucourt, Meurthe-et-Moselle, France.

This American military cemetery is one of those to be maintained by the United States for all time in Europe. Each grave will be marked by a headstone of white marble, of dignified design, with the name, rank, division, organization, date of soldier's death and State from which he came. Headstones will be placed at all graves in connection with the improvement work now in progress, as soon as possible and without waiting for special action or request on the part of relatives.

Please be assured that in effecting removal of the dead, the utmost reverential care was exercised and more than willingly accorded by those who performed this sacred duty. For the future, these graves will be perpetually maintained by the Government in a manner befitting the last resting place of our heroes.

Very truly yours,

  
R. L. FOSTER,  
Assistant.

Q.M.G.  
Central Mail & Files Bn



DEC 6 1923

H.B.

LN  
WPR WYK  
EED

*Lu*  
*WYK*  
*WYK*  
*WYK*

Col. Charles C. Pierce

126-32 St.

REVIEWED  
OSP SS.

Woodcliff  
New Jersey  
This add.

Sir,  
Will you please forward to  
the location & name of place of burial  
of my brother Corporal James Case  
2nd Pioneer Infantry Headquarters Co. A. B. Co.  
died Sept. 21. 1918 of lobar pneumonia

Any information regarding this will be  
gratefully received by us.

sincerely

Ward J. Greaves

(~~Mr~~ W. J. Greaves)

CITY OF NEW YORK  
DEPARTMENT OF PUBLIC WELFARE  
CITY HOSPITAL SCHOOL OF NURSING  
WELFARE ISLAND, N. Y. CITY

Dec 3 - 1923

193  
Corse  
James

Graves Registration Service  
War Department.  
Washington. D. C.

Gentlemen: —

Will you kindly give me some information  
as to the place of burial of Corporal  
James Corse, 2<sup>nd</sup> Pioneer Infantry  
Hq. Co. who died in France in September  
1918.

In February 1920 we received the  
following information from your office:  
— that the above mentioned James Corse  
was buried in the American Cemetery  
Is - sur - Till Cote D'Or. in Grave # 41.

Recently in any list of American  
Cemeteries abroad I have not found  
any mention of this particular one.

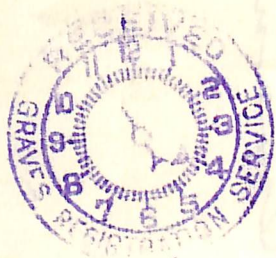
CITY OF NEW YORK  
DEPARTMENT OF PUBLIC WELFARE  
CITY HOSPITAL SCHOOL OF NURSING  
WELFARE ISLAND, N. Y. CITY

2  
Can it be possible that this cemetery  
was abandoned, and the bodies removed  
to a more permanent place of burial,  
or has the place been given another  
name?

We shall be grateful for any information  
you can give us, of course, our brother's  
last resting place is of very great  
importance to his family -

Yours very sincerely  
Mary Swanson.





DEC-5 1923



*[Faint, illegible handwritten text in cursive script, possibly bleed-through from the reverse side of the page.]*

*[Faint handwritten text, possibly a name or address.]*

NEW YORK  
CITY HOBART SCHOOL OF BUSINESS  
DEPARTMENT OF PUBLIC AFFAIRS  
CITY OF NEW YORK

Dup.

cy 58-44

3,182,278

Corse, James

(Surname.)

(Christian name in full.)

(Army serial number.)

Corp. Hdq. Co. 7<sup>th</sup> Ind. Pioneer Infantry

(Rank and organization.)

State your relationship to the deceased

Sister

Do you desire the remains brought to the United States?

No

(Yes or no.)

If remains are brought to the United States, do you  
them interred in a national cemetery?

(Yes or no.)

If you desire the remains interred at the home of the deceased, give full information below as to where they should be sent:

(Name of person to receive remain's.)

(Express office.)

(Telegraph office.)

(Number and street.)

(City or town.)

(State.)

(Sign here)

Maude Greaves

2108. Harrison Ave N York NY

(Number and street or rural route.)

(City, town, or post office.)

(State.)

Read carefully the letter accompanying this card.

Drawn by Pm

58-44

2-3

REVIEWED  
OSP SS.

2-4-21

E. a omitted



G. R. S. Form No 115

COUNTRY FRANCE

Cemetery No. 58

Sheet No. 44

File No. 24420

*3/27 Examined  
for Concentration  
St. Michael 1233  
att 4/12/22*

COMPILATION N/R REQUESTS

I. DATA COMPILATION

A. Location Index Card:-

(1) Name CORSE, James Ser. No. 3182278

TYP. MCH

(2) Rank Corp. Organization Hq. Co. 2nd Pioneer Inf.

CKR. *aw*

(3) Date of death 9/21/18

B. Registration Card:- (Check Reg. Card Inf. against Loc. Ind. Inf.)

(4) Cause of death Lobar Pneumonia

TYP. ESW

(5) Grave No 41 Row -- Plot -- Sect. --

CKR. *m. ch*

II. FILES EXAMINATION

A. Files of soldiers dying from contagious diseases; No card in file

B. A. G. O. DISPOSITION CARD

Date of receipt *none*

(6) Relationship *Sister*

(7) Name *Maud Greaves*

(8) Address *2108 Harrison Ave, New York, N.Y.*

(9) Desires remains brought to U. S.? *no*

(10) Desires remains brought to U. S. and interred in National Cemetery at

(11) If brought back, what shipping instructions?

**SEE SUSPENSION REMARKS**

*M. 4-13-20*

C. A. G. O. CORRESPONDENCE

Date of communication

(12) Does correspondence Change or qualify request as made on A.G.O. card? If so, specify such information.

*no correspondence*

(13) A. G. O. Files EXAMINED by *CWE* (Date) *4-13-20*

D (14) G. R. S. Files - Correspondence. (Has reference been made to File No. Cancellation memos.?) *Yes* Does such correspondence, if containing request for disposition, reconcile with that of A. G. O.? (Specify "Yes or "No".) If "No", give date of communication, the name, address, and relationship and substance of request.

*Mrs. Maud Greaves (Sister) 126-3 2nd St. Woodcliff, New Jersey. (no date) asks for location and name of burial place.*

(15) G. R. S. Files EXAMINED by *G. C.* (Date) *4-14-20*

(over)

*checked by [unclear]  
2-4-21*

III. FINAL ACTION

A. MEMORANDUM to D. M. O. in E. made (Date) .....

(16) Removal of Remains (within custody of G.R.S.) to .....

(17) Instructions that remains be left undisturbed .....

(18) Typed by ..... Checked by ..... (Date) .....

B. G. R. S. FORM NO. 114 made (Date) .....

(19) Typed by ..... Checked by ..... (Date) .....

C. SUSPENSION REMARKS:

Form 120 7/24/20 signed by Maude Greaves, sister, 124-32nd St. Woodcliff N. J. states that Georgina A. Corse, mother, nearest of kin, is living at 3 Bridge Wynd, Kirkwall Orkney Is. Scotland. Dec. 6/9/20

D. Dispatched (Date) ..... (Let. Trans. no. 9/18)

Par. # 2 Not to be returned (PGR)

Approved by .....

(Date) .....

Letter 6-17-20 to Mrs. Georgina A. Corse, 3 Bridge Wynd, Kirkwall Orkney Is. Scotland, requesting that she state her desires as to disposition of son's remains. CB

7-8-20 (mother) Mrs. Georgia A. Corse, 3 Bridge Wynd, Kirkwall, Scotland, Acknowledges our letter of June 17th. Requests her son's body left where it now lies. 7-26-20 z.k. "7/26-20 z.k. 7/26-20 z.k."

Let. 9/27/21 - Mother advised city is being and body will be transferred to a P.A.C. M.B.H. 9/28/21

General No. 22  
Spec. No. 1170  
C. 12 1047 No. 112

Place Is-sur-Tille, Cote d'Or, France,

# REPORT OF DISINTERMENT AND REBURIAL

Date November 18th 1921,

1. REMAINS OF CORSE, JAMES. SERIAL NUMBER 3162278.  
RANK Cpl. ORGANIZATION Hq. Co. 2nd Pion. Inf.

2. Disinterred (date): November 18th 1921 (give complete location): Grave 41, American Cemetery, G.R.S. Code # 58, Is-sur-Tille, Cote d'Or, France.  
By: Group 3 Unit Section 4.

3. Reburied (date): June 14th 1922. In (give complete location): Gr 30, Row 17, Block A.  
By: Group Reburial Unit Casket and shipping case. Nature of reburial

4. Report as to nature of original burial and condition of body upon disinterment: Buried in uniform and wooden box, Body badly decomposed, recognition impossible.

5. (a) Identification tags: Buried with body? Yes. On grave marker? Yes.

(b) Other means of identification found upon disinterment, and general remarks: No effects found, Col tr ornaments read " 2nd Pion. Inf. "

6. What does examination of body show as regards the following identifying items?

(a) Height (actual measurement) Unable to determine.

(b) Weight (estimated) --

(c) Hair—Color --

Quantity --

Characteristics --

(d) Hair on face—Color None.

Location --

Quantity --

(e) Permanent marks on body (old scars, peculiarities, or missing parts) None.

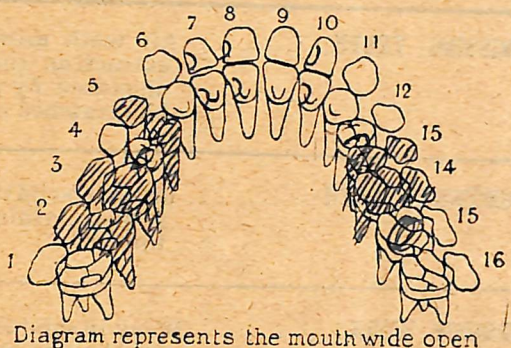
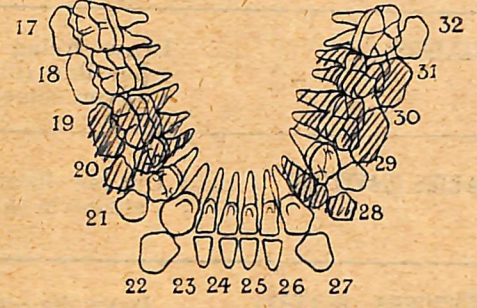


Diagram represents the mouth wide open



(f) Wounds or missing parts (received at time of casualty) Nos. 3, 5, 13, 14, 19, 20, 30, 31 Missing before death.  
None. Nos. 4, 7, 8, 10, 12, 15, Cavity.  
Nos. 28 Missing after death. Nos. 2 Decayed.

7. Disinterment supervised by A. R. Cheney, gcd.

Approved: R. L. Eain, hem  
(Title) Capt. Q. MC.






8. Reburial Supervised by H. L. Kramer

Approved: A. E. Dewey, 1st Lt. G.M.C.  
(Title)

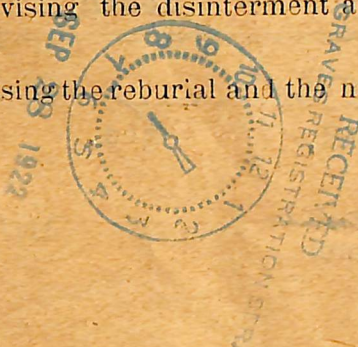
## INSTRUCTIONS FOR THE PROPER COMPLETION OF G. R. S. FORM NO. 16-A

Enter information, as noted below, on reverse side of sheet in the *corresponding numbered space*. This form is supplemental to and is to be forwarded with G. R. S. Form 1-a, reporting reburial locations. To be used in answer to Question 26, Form 114, in case no means of identification on body.

1. Show soldier's name, serial number, rank and organization, and by whom disinterred and reburied.
2. Give date and accurate information as to location from which the body was disinterred and the group and unit which made disinterment.
3. Give date and accurate information as to location of reburial and the group and unit which made reburial, and how reburial was made—in casket, wooden box, etc.
4. State to what degree decomposition has progressed, whether recognition is possible, and how the body was originally buried—in a casket, box, burlap, etc. This statement should be as complete as possible.
5. (a) State whether identification tags were found buried with body and on grave marker by reporting "Yes" or "No".  
 (b) State whether or not body appears to have been a hospital case. Were any identifying articles found in or on body or grave? List any personal effects, letters, money-order receipts, and the like found on body or in grave. Give any and all information which it is thought might be of use in identifying the body, other than that tabulated under Item No 6.
6. Give all information as to body description and dental chart as nearly correctly as the condition of the body will allow. Items (e) and (f) under the body description are very important and should be very complete. The dental chart is also very important and should be filled in with great care. There are 32 teeth to be accounted for, as shown by the numbers on the chart. Beginning at the middle line in both upper and lower jaws, the teeth are arranged symmetrically on either side and classed as incisors (cutting teeth), cuspids or canines (tearing teeth), bicuspids (chewing teeth), and molars (principal chewing teeth). An examination should be made and findings charted to cover the following basic conditions: Lost teeth, crowned teeth, bridge work, fillings, caries (cavities of decay), dentures (plates), and any deformity of jaws found.

MISSING TEETH	All teeth missing through previous extraction (not those fractured or displaced by recent wounds) should be scratched out, thus :	
CROWNED TEETH	Block in solid the crown of tooth (label gold, porcelain, or gold and porcelain), thus :	
BRIDGE WORK	Block in solid the crown of tooth (label gold bridge, gold and porcelain bridge) thus :	
FILLINGS	Draw filling on tooth accurately as possible (block in and label gold, silver, cement), thus :	
CARIES (CAVITIES)	Outline location and size of cavity, shade in thus :	
DENTURES (PLATES)	Draw diagram of relative size and shape of plate block in teeth attached and indicate retaining clasps on natural teeth with the word "clasp"	

7. Show name of person supervising the disinterment and the name and title of the person approving same.
8. Show name of person supervising the reburial and the name and title of the person approving same.



To be prepared in triplicate.

DATE Nov. 18th 1921.

REPORT OF DISINTERMENT, PREPARATION, SHIPMENT AND REBURIAL OF BODY

DISINTERMENT

COMPARATIVE REPORT

Records of G.R.S. Headquarters.

Discrepancy found upon exhumation of body

1. Name CORSE, James  
 2. No. 5182278  
 3. Rank Cpl.  
 4. Org. Hqs. Co. 2nd Pion. Inf.  
 5. D.D. 9-21-18  
 6. C.D. Lobar Pneumonia

10. Name \_\_\_\_\_  
 11. No. \_\_\_\_\_  
 12. Rank \_\_\_\_\_  
 13. Org. \_\_\_\_\_  
 14. (a) D.D. \_\_\_\_\_  
 (b) D.B. None.

Discrepancy found upon disinterment

7. Grave No. 41 Sec. \_\_\_\_\_  
 8. Plot \_\_\_\_\_ Row \_\_\_\_\_  
 9. \_\_\_\_\_

15. Grave No. \_\_\_\_\_ Sec. \_\_\_\_\_  
 16. Plot \_\_\_\_\_ Row \_\_\_\_\_  
 17. None.

18. Cemetery Amer. B. P. Cty.  
 20. Dept. or County Cote D'Or.  
 22. G.R.S. Hdqrs. Code No. 58

19. Commune or town Is-sur-Tille.  
 21. Country France.

23. Disinterred (Date) Nov. 18th 1921. By A.R. CHENEY.

24. Inscription on grave marker:

Name JAMES CORSE.  
 Rank Cpl.

Serial No. \_\_\_\_\_  
 Organization Hqs. Co. 2nd Pion. Inf.  
Grave 41.

25. Was identification disc found on grave marker? Yes. On body? Yes.

Glenn C. Dorsey  
 Signature Junior Technical Assistant

GLENN C. DORSEY.

PREPARATION

26. What other means of identification were on body? (If no disc or other means of identification on body, give description of body in detail).

No effects found. Form 16a accomplished. Collar ornaments read: 2nd Pion. Inf. BX

27. Condition of body Badly decomposed, recognition impossible.

28. Nature of burial In uniform and wooden box.

29. Any discrepancy noted upon examination of body, as compared with G.R.S. records quoted above? No.

30. Body prepared and placed in casket: Date Nov. 18th 1921. By A.R. CHENEY.

AUDITED BY

31. Casket sealed by A.R. CHENEY.

M.A.C.  
 Signature of Embalmer, (Supervisor)

A.R. CHENEY.

5722/23

SHIPMENT. (Show actual marking of box.) Box No. C-17149

32. Designation of body:

Name James CORSE Serial No. 3182278

Rank Cpl. Organization Hqs. Co. 2nd. Pion. Inf.

33. Consigned to:

Name of Permanent Cemetery St. Mihiel Amer. Cty. #1233, Thiaucourt, M-et-M.

34. Casket boxed and marked (Date) No. v. 18th 1921. By A.R. CHENEY.

35. I hereby certify that all the foregoing operations were conducted and accomplished under my immediate supervision and that the report above is correct.

Signature of G.R.S. Inspector *[Signature]* hem  
P. L. FAIR  
Capt. Q.M.C.

36. Remarks \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

37. Shipped from point of Operation: (Date) Nov. 18th 1921

To point of Concentration N Dijon, Cote d'Or, France.  
(Name)

Convoyer \_\_\_\_\_ Signature Shipping Officer Capt. Q.M.C.

38. Received at Railhead or Point of Concentration: Date \_\_\_\_\_

By G.R.S. Representative \_\_\_\_\_

39. Shipped from Railhead or Point of Concentration: Date 30 NOV 1921

To Permanent Cemetery St. Mi hiel, Amer. Cty. #1233, Thiaucourt, M et M.  
(Name)

Convoyer Clinton J. Rieley Signature Shipping Officer *[Signature]*  
W. R. Buckley, Capt. Q.M.C.

40. Received: Date 5-DEC 1921

G.R.S. Representative *[Signature]*  
J. B. Daniel, Capt. 2mc.

41. Reinterred. June 14th, 1922.  
(Date)

42. Grave No. 30 Section \_\_\_\_\_

43. ~~PLOT~~ Block A. Row 17

G.R.S. Representative *[Signature]*  
A. E. Dewey, 1st Lt. Q.M.C.

MAY 13 1920

Jms.

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY  
GRAVES REGISTRATION SERVICE  
WASHINGTON

FROM: Chief, Graves Registration Service, Q.M.C.  
TO: Maud Greaves, 2108 Harrison Ave., New York, N. Y.  
SUBJECT: Remains of Corp. James Corse.

*124-32<sup>nd</sup> St. Woodcliff, N.J. Rush Answer*

*Note change address*

The records of this office show that you have requested that his body be Not Returned to United States.

*G.R.S. Europe*

*The instructions you have received are correct in accordance with the wishes of his family.*

*(Jms) Maud Greaves Noted on Form No. 115 6/9/20 Jms*

If these are not the correct instructions, please change them. Make changes on reverse side of this sheet.

The nearest living relative may choose between, (1) return of the body to any address in the United States; (2) interment in Arlington, Va., National Cemetery; or (3) remain in France.

By authority of the Quartermaster General:

CHARLES C. PIERCE,  
Colonel, U.S. Army.

NAME OF	NO. & STREET	TOWN	STATE
Soldier's Widow	<i>No Widow</i>		
Soldier's Children	<i>No Children</i>		
(Name oldest first)			
Father	<i>Not Living</i>		
Mother	<i>3 Bridge Wynd Blackwell Outney Ills Scotland</i>		
Brothers	<i>1. John G Corse 3 Bridge Wynd Blackwell Outneys.</i>		
(Name oldest first)	<i>2. Robert W. Corse. Post Office Stromness Outneys.</i>		
Sisters	<i>Mary A. Swanson City Hospital Blackwells Ills New York.</i>		
Date	<i>24 May 1920</i>		
Address	<i>124 - 32 St Woodcliff N.J.</i>		
Relationship	<i>Sister</i>		

The transfer of bodies will be made entirely at government expense.

Note:- Instructions on the reverse side of this sheet should be carefully read before filling out this paper. SAF (OVER)

7. Use the enclosed envelope - pay no postage.

6. You are requested to return this paper AT ONCE in order to avoid delay in the case of this body.

5. If YOU are not the nearest living relative and do not know who or where the nearest relatives are, please fill out this paper AT ONCE and mail to this office.

4. If YOU are not the nearest relative, please ask the nearest relative, if living near you, to fill out this paper.

3. If there are minor children of the deceased soldier and no widow, the legally appointed guardian of the children should ascertain their wishes and act for them in this matter.

2. This paper must be returned showing the name and address of each of the nearest living relatives in the spaces provided therefor on the other side of this sheet.

1. This paper MUST be signed by the person who is the NEXT of kin in the order shown in the square on other side of this sheet.

INSTRUCTIONS FOR FILLING OUT

CHARLES C. BAKER  
Colonel, U. S. Army

NAME OF \_\_\_\_\_  
NO. & STREET \_\_\_\_\_  
TOWN \_\_\_\_\_  
STATE \_\_\_\_\_

Soldier's Widow

*Mr. Wilson*

Soldier's Children

*Mr. Robinson*

Father

*Mr. Lewis*

Mother

Brothers

(Name of each first)

Sisters



Signature \_\_\_\_\_

Date of issue \_\_\_\_\_

Relationship \_\_\_\_\_

Note - Instructions on the reverse side of this sheet should be read before filling out this paper.

24420

# GRAVE LOCATION BLANK

LOCATION OF THE GRAVE OF

Corse 3182278 James  
(Surname.) (Number.) (First Name and Initials.)

Corporal Hdq. Co. 2nd Pion Inf.  
(Rank.) (Organization.)

DATE OF BURIAL Sept. 25 1918.

PLACE OF BURIAL Is-sur-Tille

(Give Cemetery, Town and Department.) Map reference must specify clearly what map is used.

Amer E.F. Cemetary # 58

Map D-24

GRAVE NUMBER 41

HOW MARKED: Name Peg? Yes Cross? Yes  
Headboard? Bottle?

IDENTIFICATION TAGS:

Was one buried with body? Yes

Was one fastened to name peg or stake used as a grave marker? Yes

If name unknown and tags missing, description and marks should be given here:

58

REPORTED BY:

Joseph A. Morris Chap. SS.  
(Signature and Rank of Reporting Officer.)  
and Promoted by A.E.F.

REVIEWED  
1007 1007

This portion to be sent to Chief of Graves Registration Service.

24420

# RAV LOCATION BLANK

## LOCATION OF THE GRAVE OF

Corse (Surname.) 3182278 (Number.) (First Name and Initials.) James

Corp. (Rank.) Hdq. Hdq. 2nd. Pioneer Inf. (Organization.)

DATE OF BURIAL..... Sept 23, 1918.

PLACE OF BURIAL... Is-Sur-Tille

(Give Cemetery, Town and Department.) Map reference must specify clearly what map is used.

American Exp. Force Cemetery 58

Died 7/21/18 Map D-24  
Camp Hosp 41  
House Cont. Pneu.

GRAVE NUMBER..... 41

HOW MARKED: Name Peg? Yes Cross? Yes

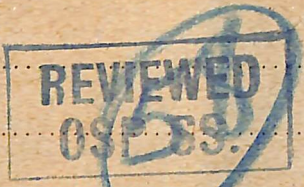
Headboard? ..... Bottle? .....

### IDENTIFICATION TAGS:

Was one buried with body? Yes

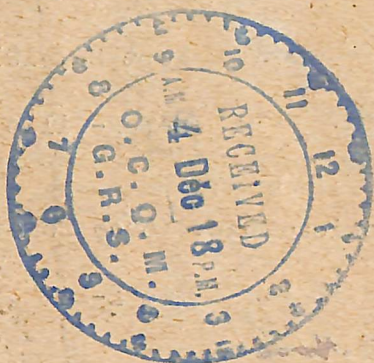
Was one fastened to name peg or stake used as a grave marker? Yes

If name unknown and tags missing, description and marks should be given here:



REPORTED BY: Corrected Copy  
Joseph A. Morris 2nd. Pioneer Inf.  
(Signature and Rank of Reporting Officer.)

This portion to be sent to Chief of Graves Registration Service.



1. G. R. S. Form No. 1.

Hq. G. R. S. File

2. Soldier's No.

3182278

3. .... Corson ..... James .....  
Surname (in block letters) First Name and Initials

4. ..Cpl..... Hq. Co. .... 2nd. Pioneer Inf  
Rank Company Regt. or Corps

5. .... 9/21/18 ..... Lob. Pneum .....  
Date of Death Cause, if known

6. .... Sept. 23/18 ..... Is-sur-Telle .....  
Date of Burial Cemetery

7. .... Is-sur-Telle ..... Gote d'Or .....  
Town or Commune (in block letters) Department

8. .... 41 .....  
Grave No. Plot No. or Letter

9. Name Peg? .X. Cross? .X. Headboard? ..... Bottle? .....  
Check Method of Marking

10. Buried with Body? <sup>?X</sup> ..... Attached to Grave Marker? Yes. .  
Identification Tags

11. If name unknown and tags missing, give marks and description.

.....  
.....

12. ....  
Map Reference, if interment is outside of cemetery

58  
REVIEWED  
OSP SS.

13. ....  
Give name of Chaplain or Burial Officer

Signed Chap. Morris. 2nd. Pioneer  
Group ..... Unit ..... D ..... G. R. S. Inf.



RECEIVED

AUG 29 1890

O. G. D. M.

G. R. S.

WAR DEPARTMENT  
OFFICE OF THE QUARTERMASTER GENERAL OF THE ARMY  
WASHINGTON

24420

File

September 27, 1921.

MRH 9/29/21

No. 293.8 Cem. Div. - #24420 (Corse, James Cpl.) (Qty. #58 - Sheet #44).  
From: The Quartermaster General, U. S. Army (Cemeterial Division).  
To: Mrs. Georgina Arthur Corse, 3 Bridge Wynd, Kirkwall, Scotland.  
Subject: Disposition of Remains.

Referring to your request that the remains of the deceased soldier named above be left undisturbed, you are advised that the cemetery in which the body is now buried is a temporary one. It will be necessary, therefore, to remove it to the nearest permanent American Cemetery where the grave will be marked by a suitable headstone and will be perpetually maintained in the most reverent and careful manner by our Government as a memorial to the late soldier's supreme sacrifice.

After the body has been reinterred in one of the permanent American cemeteries you will be notified of its final resting place. You are assured that the Government will never forget your priceless gift to the cause of freedom.

By authority of the <sup>Acting</sup> Quartermaster General:

CHARLES J. WYNNE,  
Captain, Q. M. Corps.

MRH  
HCH

MAILED  
SEP 29 1921

C.R.S.

Noted on Form No. 115  
Date MRH 9/29/21

S/3263/LML

CASE OF <sup>W. B. Case</sup> : CORSE, James, Corp. 58-44

A.G.O. Card - sister, Maud Greaves, 2108 Harrison Ave., New York City, N.Y., requests body remain in France.

Form # 120, 5/24/20, signed by Maude Greaves, sister, 124-32nd St., Woodcliff, N.J., States that Georgina A. Corse, mother, nearest of kin, is living at 3 Bridge Wynd, Buckwoll, Orhney Ildo, Scotland.

Letter 6/17/20 to mother re dispo. of remains. 7/6/20 mother, Georgis A. Corse, 3 Bridge Wynd, Kirkwall, Scotland, requests body "remain where it now lies."

~~Recommend Form Letter~~

Concentrate

advise

Amesbury City.

9/11/21  
K. H.